

book review

***Intervening After Violence: Therapy for Couples and Families*, by Clarissa Sammut Scerri, Arlene Vetere, Angela Abela, and Jan Cooper. Cham, Switzerland: Springer, 2017, 179 pp., \$84.99 (hardcover)**

Scerri and colleagues, in their 2017 book, present an overview of systemic approaches to intervene with couples, parents, children and adult survivors after intimate partner violence (IPV) ends and provide an overview of programs designed to prevent IPV from occurring. Healing a repair after IPV is the primary focus of the book. The authors use a systemic lens to discuss a variety of interventions. Much of the work focuses on building strong attachment bonds between parents and children and between couples who choose to stay together after experiencing IPV. In addition, throughout the book, trauma informed treatment, supervision, and supervision of supervision is emphasized. This book is a must-read for systemic clinicians and supervisors.

The authors of this book provide a much-needed systemic perspective on the issue of IPV. Each of the authors has a strong background in the area. Clarissa Sammut Scerri has studied Maltese women's recall of the impact of domestic violence during childhood and the relational impact in their adult lives (Sammut Scerri, 2015). Arlene Vetere and coauthor Jan Cooper, specialists in family and couple violence interventions, have codirected a systemically-focused domestic violence intervention project in the United Kingdom and have published prolifically on the topic, including a book on a safety-focused systemic intervention based on their work (Cooper & Vetere, 2005). Angela Abela is a professor and head of the Department of Family Studies at the University of Malta. She is an expert for the Council of Europe and worked on the *Policy to Support Positive Parenting*.

Topics addressed early in the book vary from IPV among older adults to the traumatogenic impact of growing up in a home with IPV on adult attachment relationships. The authors provide a thorough overview of types of violence in the home which clinicians should be aware of, and assess for, when working with couples experiencing IPV. This is important because it highlights to any clinician that if a couple comes to therapy and reports experiencing violence, the therapist should assess for additional violence occurring within the home (i.e., child abuse, violence among siblings, and adolescent to parent violence). A clinician could also use information from the second chapter of the book, which focuses on themes and recollections from women who have witnessed IPV in their family-of-origin, to help educate themselves, as well as their clients on the potential impacts that violence in their relationship may have on their children. This work can also be used to validate clients who have experienced

violence in their family-of-origin, and enhance clients' process of making sense of these childhood experiences.

Next, in Chapter 3, the authors offer a step-by-step guide to safely offering a systemic approach to responding to IPV based on over 20 years of the authors' research and delivering of the "Safer Families" family intervention service in Reading, United Kingdom (Cooper & Vetere, 2005; Vetere, 2015). In this section of the book, the authors provide clear guidance on assessing for risk of further violence when working with couples who have experienced IPV. The authors emphasize the importance of assessing family members' abilities to self-regulate their emotions, empathize with others, reflect on the situation and learn from past mistakes, take responsibility, and recognize that violence is a serious issue and cannot continue in their relationship. The authors also highlight the importance of substance abuse treatment if one family member struggles with abusing substances. We believe that the authors provide thorough details on what needs to be examined when assessing for the risk of future violence. This book also makes a strong distinction between violence that occurs within a context where individuals may lack emotional regulation, self-control, or conflict resolution skills compared to violence that occurs in order to exert power and control over another individual. We agree with the notion, and appreciated the strong message in the book that couples treatment, when violence is used solely to dominate and control the other partner, is not appropriate.

In the third chapter of the book, the authors also discuss safety planning, and provides ways in which therapists can incorporate safety planning into six sessions with the couple, as well as addressing safety with children, before beginning couples therapy. We appreciated this strong emphasis on creating and maintaining a safety plan with clients—as it is imperative for therapist working with couples who have experienced violence in their relationship. We also appreciated the focus on questions to ask children about their safety, as this is not something that is always addressed in literature focusing on working with couples who have experienced violence.

The fourth chapter of this book brings up a new topic, which involves helping couples separate safely. The authors emphasize the multiple losses that separation involves, including transitions, change of school for children, loss of friends, and the importance of supporting parents and children in during these transitions. This is an important topic to cover in the book, as it may be that couples who come to therapy originally seek to repair their relationship, but throughout the course of therapy, agree that terminating the relationship may be best for both parties involved. The emphasis on safe separations in this book is important and necessary in order to give clinicians a thorough guide on working with couples who have experienced IPV.

Next, the book adds depth to their earlier work on healing and repairing relationships after the violence has stopped in Chapters 5 and 6. Empathy and intergenerational patterns of comforting are highlighted and strategies for helping couples build a secure attachment base and heal attachment injuries are emphasized. The book also emphasizes the importance of attachment work individually with children and jointly between parents and children. The strong emphasis on healing after

violence provides clinicians with a strong therapeutic framework to use when working with survivors of violence, as well as couples who come in after experiencing IPV in their relationship.

One of the most important aspects of the book for clinicians is the importance of the self-of-the-therapist work, and the impact of working with trauma and trauma survivors on clinicians. This is covered in Chapter 7 of the book. There is a strong emphasis on the responsibilities of supervisors and the importance of supervision of supervision. Activities such as sculpting and internalized other interviewing with the supervisee are described and illustrated. The importance of supervisors acting as a secure base for supervisees working with trauma and IPV is emphasized along with the importance of supervisors acting ethically in their roles, including giving supervisees adequate performance evaluations. The final chapter of the book emphasizes prevention and early intervention with violence in families, which is another integral part of working with families, couples, and individuals who have experienced violence in their lives.

CONCLUSION

Overall, *Intervening After Violence: Therapy for Couples and Families* is an exemplary book for clinicians and therapists who wish to learn more about working with families, couples, and/or individuals who have experienced violence in their lives. Throughout the book, the authors provide detailed examples, protocols, and frameworks that could be helpful for all clinicians. This book can be used to provide education and insight on types of violence, as well as repercussions of witnessing and experiencing violence for both clinicians and clients. This book also provides a clear framework for clinicians working with couples and families where IPV has been present (including assessment, safety planning, the importance of taking accountability, and healing and repair in relationships). The emphasis throughout the book on the children is much appreciated and important for clinicians to consider. Another strength of the book is the focus on helping couples separate safely after IPV has occurred. This book is also a must-read for clinicians and supervisors, due to the emphasis on self-of-the-therapist work, supervision, and supervision of supervision. We believe that this book will be a useful resource for any clinician working with individuals who have experienced IPV, individuals who have witnessed IPV in their family-of-origin as children, as well as couples who wish to stay together (or separate safely) after experiencing IPV in their relationship.

Sandra M. Stith 
Chelsea M. Spencer
Kansas State University
Manhattan, Kansas USA

REFERENCES

- Cooper, J., & Vetere, A. (2005). *Domestic violence and family safety: A systemic approach to working with violence in families*. London, England: Whurr Publishers.
- Sammut Scerri, C. (2015). *Living with contradictions of love and violence: A grounded theory study of women's understanding of their childhood experiences of domestic violence*. Doctoral Dissertation. University of Surrey, Guildford. United Kingdom.
- Vetere, A. (2015). Supervision and consultation practice with domestic violence. *Clinical Child Psychology and Psychiatry*, 17, 181–185. doi:10.1177/1359104511433563